

CHAPTER 18 PRINCIPLES OF PROFESSIONAL ETHICS

653—18.1(147,148,272C) Principles of medical ethics. The Code of Medical Ethics (2002) prepared and approved by the American Medical Association and the Code of Ethics (2001) prepared and approved by the American Osteopathic Association shall be utilized by the board as guiding principles in the practice of medicine and surgery and the practice of osteopathic medicine and surgery and osteopathy in this state. These principles are intended to aid physicians individually and collectively in maintaining a high level of ethical conduct. They are not laws but standards by which a physician may determine the propriety of conduct in relationships with patients, with colleagues, with members of allied professions, and with the public. The principal objective of the medical profession is to render service to humanity with full respect for dignity. Physicians should merit the confidence of patients entrusted to their care, rendering to each a full measure of service and devotion.

653—18.2(147,148,272C) American Medical Association Code of Medical Ethics.

18.2(1) A physician should strive continually to improve medical knowledge and skill and should make available to patients and colleagues the benefits of the physician's professional attainments.

18.2(2) A physician should practice a method of healing founded on a scientific basis; and the physician should not voluntarily associate professionally with anyone who violates this principle.

18.2(3) The medical profession should safeguard the public and itself against physicians deficient in moral character or professional competence. Physicians should observe all laws, uphold the dignity and honor of the profession and accept its self-imposed disciplines. They should expose, without hesitation, illegal or unethical conduct of fellow members of the profession.

18.2(4) A physician may choose whom the physician will serve. In an emergency, however, the physician should render service to the best of the physician's ability. Having undertaken the case of a patient, the physician may not neglect the patient; and unless the patient has been discharged the physician may discontinue services only after giving adequate notice. The physician should not solicit patients.

18.2(5) A physician should not dispose of the physician's services under terms or conditions which tend to interfere with or impair the free and complete exercise of medical judgment and skill or tend to cause a deterioration of the quality of medical care.

18.2(6) In the practice of medicine, a physician should limit the source of professional income to medical services actually rendered by the physician, or under the physician's supervision to the physician's patients. The physician's fee should be commensurate with the services rendered and the patient's ability to pay. The physician should neither pay nor receive a commission for referral of patients. Drugs, remedies or appliances may be dispensed or supplied by the physician provided they are in the best interest of the patient.

18.2(7) A physician should seek consultation upon request in doubtful or difficult cases or whenever it appears that the quality of medical service may be enhanced thereby.

18.2(8) A physician may not reveal the confidences entrusted to the physician in the course of medical attendance, or the deficiencies the physician may observe in the character of patients, unless the physician is required to do so by law or unless it becomes necessary in order to protect the welfare of the individual or of the community.

18.2(9) The honored ideals of the medical profession imply that the responsibilities of the physician extend not only to the individual, but also to society where these responsibilities deserve the physician's interest and participation in activities which have the purpose of improving both the health and well-being of the individual and the community.

653—18.3(147,148,272C) American Osteopathic Association Code of Ethics.

18.3(1) The physician shall keep in confidence whatever the physician may learn about a patient in the discharge of professional duties. Information shall be divulged by the physician when required by law or when authorized by the patient.

18.3(2) The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

18.3(3) A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose a physician. The physician must have complete freedom to choose patients whom the physician will serve. In emergencies, a physician should make the physician's services available.

18.3(4) The physician shall give due notice to the patient or to those responsible for the patient's care when the physician withdraws from a case so that another physician may be summoned.

18.3(5) A physician is never justified in abandoning a patient.

18.3(6) A physician shall practice in accordance with the body of systematized knowledge related to the healing arts and shall avoid professional association with individuals or organizations which do not practice or conduct their affairs in accordance with such knowledge.

18.3(7) A physician shall not be identified in any manner with testimonials for proprietary products or devices advertised or sold directly to the public.

18.3(8) A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless the physician is actually licensed on the basis of that degree in the state in which the physician practices.

18.3(9) A physician shall obtain consultation whenever requested to do so by the patient. A physician should not hesitate to seek consultation whenever the physician believes it advisable.

18.3(10) Illegal, unethical or incompetent conduct of physicians shall be revealed to the proper tribunals.

18.3(11) A physician shall not assume treatment of a patient under the care of another physician except in emergencies and only during the time that the attending physician is not available unless requested by the patient.

18.3(12) Any fee charged by a physician shall be reasonable.

18.3(13) A physician shall not pay or receive compensation for referral of patients.

18.3(14) The physician shall cooperate fully in complying with all laws and regulations pertaining to practice of the healing arts and protection of the public health.

653—18.4(17A,147,148,272C) Waiver or variance prohibited. Rules in this chapter are not subject to waiver or variance pursuant to 653—Chapter 3 or any other provision of law.

These rules are intended to implement Iowa Code sections 17A.9A, 147.55 and 147.76.

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CHAPTER 19

Reserved

CHAPTER 20**PHYSICIAN'S ASSISTANTS**

Rescinded IAB 11/14/90, effective 10/25/90

See 645—Chapter 325